

COVER PAGE

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2011 MAR -1 PM 5:05

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)  
Dutton Robert Dale

1. Office, Agency, or Court

Agency Name

State Senate

Division, Board, Department, District, if applicable

31st District

Your Position

State Senator

► If filing for multiple positions, list below or on an attachment.

Agency: \_\_\_\_\_ Position: \_\_\_\_\_

2. Jurisdiction of Office (Check at least one box)

☒ State

☐ Judge (Statewide Jurisdiction)

☐ Multi-County \_\_\_\_\_

☐ County of \_\_\_\_\_

☐ City of \_\_\_\_\_

☐ Other \_\_\_\_\_

3. Type of Statement (Check at least one box)

☒ Annual: The period covered is January 1, 2010, through December 31, 2010.

-or-

The period covered is \_\_\_\_\_, through December 31, 2010.

☐ Leaving Office: Date Left \_\_\_\_\_  
(Check one)

☐ The period covered is January 1, 2010, through the date of leaving office.

☐ Assuming Office: Date \_\_\_\_\_

☐ The period covered is \_\_\_\_\_, through the date of leaving office.

☐ Candidate: Election Year \_\_\_\_\_ Office sought, if different than Part 1: \_\_\_\_\_

4. Schedule Summary

Check applicable schedules or "None."

► Total number of pages including this cover page: 16

☒ Schedule A-1 - Investments - schedule attached

☒ Schedule C - Income, Loans, & Business Positions - schedule attached

☒ Schedule A-2 - Investments - schedule attached

☒ Schedule D - Income - Gifts - schedule attached

☐ Schedule B - Real Property - schedule attached

☒ Schedule E - Income - Gifts - Travel Payments - schedule attached

-or-

☐ None - No reportable interests on any schedule

I certify under penalty of perjury under the laws of the State of California that

Date Signed February 28, 2011  
(month, day, year)

Signature

**SCHEDULE A-1****Investments****Stocks, Bonds, and Other Interests**

(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

**CALIFORNIA FORM 700**

FAIR POLITICAL PRACTICES COMMISSION

Name

Robert D Dutton

► NAME OF BUSINESS ENTITY  
**United Investors LLC**

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
**Invest in Div Pacific Opp Fund**

FAIR MARKET VALUE  
☐ \$2,000 - \$10,000      ☐ \$10,001 - \$100,000  
☒ \$100,001 - \$1,000,000      ☐ Over \$1,000,000

NATURE OF INVESTMENT  
☐ Stock      ☐ Other \_\_\_\_\_ (Describe)  
☒ Partnership      ☐ Income Received of \$0 - \$499  
                                  ☒ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / **10**      **10** / **1** / **10**  
 ACQUIRED      DISPOSED

► NAME OF BUSINESS ENTITY  
**Western Hills Estates LTD**

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
**Raw Land**

FAIR MARKET VALUE  
☐ \$2,000 - \$10,000      ☒ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000      ☐ Over \$1,000,000

NATURE OF INVESTMENT  
☐ Stock      ☐ Other \_\_\_\_\_ (Describe)  
☒ Partnership      ☒ Income Received of \$0 - \$499  
                                  ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / **10**      \_\_\_\_\_ / \_\_\_\_\_ / **10**  
 ACQUIRED      DISPOSED

► NAME OF BUSINESS ENTITY  
**ISHRS MSCI Emerging Markets**

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
**index fund**

FAIR MARKET VALUE  
☒ \$2,000 - \$10,000      ☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000      ☐ Over \$1,000,000

NATURE OF INVESTMENT  
☒ Stock      ☐ Other \_\_\_\_\_ (Describe)  
☐ Partnership      ☐ Income Received of \$0 - \$499  
                                  ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / **10**      \_\_\_\_\_ / \_\_\_\_\_ / **10**  
 ACQUIRED      DISPOSED

► NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE  
☐ \$2,000 - \$10,000      ☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000      ☐ Over \$1,000,000

NATURE OF INVESTMENT  
☐ Stock      ☐ Other \_\_\_\_\_ (Describe)  
☐ Partnership      ☐ Income Received of \$0 - \$499  
                                  ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / **10**      \_\_\_\_\_ / \_\_\_\_\_ / **10**  
 ACQUIRED      DISPOSED

► NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE  
☐ \$2,000 - \$10,000      ☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000      ☐ Over \$1,000,000

NATURE OF INVESTMENT  
☐ Stock      ☐ Other \_\_\_\_\_ (Describe)  
☐ Partnership      ☐ Income Received of \$0 - \$499  
                                  ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / **10**      \_\_\_\_\_ / \_\_\_\_\_ / **10**  
 ACQUIRED      DISPOSED

► NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE  
☐ \$2,000 - \$10,000      ☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000      ☐ Over \$1,000,000

NATURE OF INVESTMENT  
☐ Stock      ☐ Other \_\_\_\_\_ (Describe)  
☐ Partnership      ☐ Income Received of \$0 - \$499  
                                  ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / **10**      \_\_\_\_\_ / \_\_\_\_\_ / **10**  
 ACQUIRED      DISPOSED

Comments: \_\_\_\_\_

**SCHEDULE A-1****Investments****Stocks, Bonds, and Other Interests**  
(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

**CALIFORNIA FORM 700**

FAIR POLITICAL PRACTICES COMMISSION

Name

Robert D Dutton

<p>▶ NAME OF BUSINESS ENTITY <b>TEVA Pharmaceuticals ADR</b></p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY <b>Pharmaceuticals</b></p> <p>FAIR MARKET VALUE <input checked="" type="checkbox"/> \$2,000 - \$10,000      <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000      <input type="checkbox"/> Over \$1,000,000</p> <p>NATURE OF INVESTMENT <input checked="" type="checkbox"/> Stock      <input type="checkbox"/> Other _____ (Describe) <input type="checkbox"/> Partnership      <input type="radio"/> Income Received of \$0 - \$499                                  <input type="radio"/> Income Received of \$500 or More (Report on Schedule C)</p> <p>IF APPLICABLE, LIST DATE: ____/____/10      ____/____/10 ACQUIRED      DISPOSED</p>	<p>▶ NAME OF BUSINESS ENTITY <b>International Business Machines Corp</b></p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY <b>Business Machines</b></p> <p>FAIR MARKET VALUE <input type="checkbox"/> \$2,000 - \$10,000      <input checked="" type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000      <input type="checkbox"/> Over \$1,000,000</p> <p>NATURE OF INVESTMENT <input checked="" type="checkbox"/> Stock      <input type="checkbox"/> Other _____ (Describe) <input type="checkbox"/> Partnership      <input type="radio"/> Income Received of \$0 - \$499                                  <input type="radio"/> Income Received of \$500 or More (Report on Schedule C)</p> <p>IF APPLICABLE, LIST DATE: ____/____/10      ____/____/10 ACQUIRED      DISPOSED</p>
<p>▶ NAME OF BUSINESS ENTITY <b>Walmart Stores</b></p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY <b>retail</b></p> <p>FAIR MARKET VALUE <input checked="" type="checkbox"/> \$2,000 - \$10,000      <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000      <input type="checkbox"/> Over \$1,000,000</p> <p>NATURE OF INVESTMENT <input checked="" type="checkbox"/> Stock      <input type="checkbox"/> Other _____ (Describe) <input type="checkbox"/> Partnership      <input type="radio"/> Income Received of \$0 - \$499                                  <input type="radio"/> Income Received of \$500 or More (Report on Schedule C)</p> <p>IF APPLICABLE, LIST DATE: ____/____/10      ____/____/10 ACQUIRED      DISPOSED</p>	<p>▶ NAME OF BUSINESS ENTITY <b>ISHS S&amp;P/TOPIX</b></p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY <b>index fund</b></p> <p>FAIR MARKET VALUE <input checked="" type="checkbox"/> \$2,000 - \$10,000      <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000      <input type="checkbox"/> Over \$1,000,000</p> <p>NATURE OF INVESTMENT <input checked="" type="checkbox"/> Stock      <input type="checkbox"/> Other _____ (Describe) <input type="checkbox"/> Partnership      <input type="radio"/> Income Received of \$0 - \$499                                  <input type="radio"/> Income Received of \$500 or More (Report on Schedule C)</p> <p>IF APPLICABLE, LIST DATE: ____/____/10      ____/____/10 ACQUIRED      DISPOSED</p>
<p>▶ NAME OF BUSINESS ENTITY <b>Chevron</b></p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY <b>Energy</b></p> <p>FAIR MARKET VALUE <input checked="" type="checkbox"/> \$2,000 - \$10,000      <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000      <input type="checkbox"/> Over \$1,000,000</p> <p>NATURE OF INVESTMENT <input checked="" type="checkbox"/> Stock      <input type="checkbox"/> Other _____ (Describe) <input type="checkbox"/> Partnership      <input type="radio"/> Income Received of \$0 - \$499                                  <input type="radio"/> Income Received of \$500 or More (Report on Schedule C)</p> <p>IF APPLICABLE, LIST DATE: 4 / 26 / 10      ____/____/10 ACQUIRED      DISPOSED</p>	<p>▶ NAME OF BUSINESS ENTITY <b>Market Vectors AGRIBUS ETF</b></p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY <b>index fund</b></p> <p>FAIR MARKET VALUE <input checked="" type="checkbox"/> \$2,000 - \$10,000      <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000      <input type="checkbox"/> Over \$1,000,000</p> <p>NATURE OF INVESTMENT <input checked="" type="checkbox"/> Stock      <input type="checkbox"/> Other _____ (Describe) <input type="checkbox"/> Partnership      <input type="radio"/> Income Received of \$0 - \$499                                  <input type="radio"/> Income Received of \$500 or More (Report on Schedule C)</p> <p>IF APPLICABLE, LIST DATE: ____/____/10      ____/____/10 ACQUIRED      DISPOSED</p>

Comments: \_\_\_\_\_

**SCHEDULE A-1****Investments****Stocks, Bonds, and Other Interests**

(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

**CALIFORNIA FORM 700**

FAIR POLITICAL PRACTICES COMMISSION

Name

Robert D Dutton

<p>▶ NAME OF BUSINESS ENTITY <b>NASDAQ 100 Series (QQQQ)</b></p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY <b>index fund</b></p> <p>FAIR MARKET VALUE <input type="checkbox"/> \$2,000 - \$10,000    <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000    <input type="checkbox"/> Over \$1,000,000</p> <p>NATURE OF INVESTMENT <input type="checkbox"/> Stock    <input checked="" type="checkbox"/> Other <b>Index Fund</b> (Describe)</p> <p><input type="checkbox"/> Partnership    <input type="radio"/> Income Received of \$0 - \$499                                  <input type="radio"/> Income Received of \$500 or More (Report on Schedule C)</p> <p>IF APPLICABLE, LIST DATE: ____/____/10    ____/____/10 ACQUIRED    DISPOSED</p>	<p>▶ NAME OF BUSINESS ENTITY <b>CVB Financial CP</b></p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY <b>commercial bank</b></p> <p>FAIR MARKET VALUE <input type="checkbox"/> \$2,000 - \$10,000    <input type="checkbox"/> \$10,001 - \$100,000 <input checked="" type="checkbox"/> \$100,001 - \$1,000,000    <input type="checkbox"/> Over \$1,000,000</p> <p>NATURE OF INVESTMENT <input checked="" type="checkbox"/> Stock    <input type="checkbox"/> Other _____ (Describe)</p> <p><input type="checkbox"/> Partnership    <input type="radio"/> Income Received of \$0 - \$499                                  <input type="radio"/> Income Received of \$500 or More (Report on Schedule C)</p> <p>IF APPLICABLE, LIST DATE: ____/____/10    ____/____/10 ACQUIRED    DISPOSED</p>
<p>▶ NAME OF BUSINESS ENTITY <b>Vineyard National Bank - see comment</b></p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY <b>commercial bank</b></p> <p>FAIR MARKET VALUE <input checked="" type="checkbox"/> \$2,000 - \$10,000    <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000    <input type="checkbox"/> Over \$1,000,000</p> <p>NATURE OF INVESTMENT <input checked="" type="checkbox"/> Stock    <input type="checkbox"/> Other _____ (Describe)</p> <p><input type="checkbox"/> Partnership    <input type="radio"/> Income Received of \$0 - \$499                                  <input type="radio"/> Income Received of \$500 or More (Report on Schedule C)</p> <p>IF APPLICABLE, LIST DATE: ____/____/10    ____/____/10 ACQUIRED    DISPOSED</p>	<p>▶ NAME OF BUSINESS ENTITY <b>Prudential Financial Inc.</b></p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY <b>Financial services</b></p> <p>FAIR MARKET VALUE <input checked="" type="checkbox"/> \$2,000 - \$10,000    <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000    <input type="checkbox"/> Over \$1,000,000</p> <p>NATURE OF INVESTMENT <input checked="" type="checkbox"/> Stock    <input type="checkbox"/> Other _____ (Describe)</p> <p><input type="checkbox"/> Partnership    <input type="radio"/> Income Received of \$0 - \$499                                  <input type="radio"/> Income Received of \$500 or More (Report on Schedule C)</p> <p>IF APPLICABLE, LIST DATE: ____/____/10    ____/____/10 ACQUIRED    DISPOSED</p>
<p>▶ NAME OF BUSINESS ENTITY <b>NRG Energy Inc.</b></p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY <b>energy provider</b></p> <p>FAIR MARKET VALUE <input type="checkbox"/> \$2,000 - \$10,000    <input checked="" type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000    <input type="checkbox"/> Over \$1,000,000</p> <p>NATURE OF INVESTMENT <input checked="" type="checkbox"/> Stock    <input type="checkbox"/> Other _____ (Describe)</p> <p><input type="checkbox"/> Partnership    <input type="radio"/> Income Received of \$0 - \$499                                  <input type="radio"/> Income Received of \$500 or More (Report on Schedule C)</p> <p>IF APPLICABLE, LIST DATE: ____/____/10    ____/____/10 ACQUIRED    DISPOSED</p>	<p>▶ NAME OF BUSINESS ENTITY <b>Health Care Select</b></p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY <b>Health Index fund</b></p> <p>FAIR MARKET VALUE <input checked="" type="checkbox"/> \$2,000 - \$10,000    <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000    <input type="checkbox"/> Over \$1,000,000</p> <p>NATURE OF INVESTMENT <input type="checkbox"/> Stock    <input checked="" type="checkbox"/> Other <b>index fund</b> (Describe)</p> <p><input type="checkbox"/> Partnership    <input type="radio"/> Income Received of \$0 - \$499                                  <input type="radio"/> Income Received of \$500 or More (Report on Schedule C)</p> <p>IF APPLICABLE, LIST DATE: ____/____/10    ____/____/10 ACQUIRED    DISPOSED</p>

Comments: Vineyard Bank taking over by FDIC, stock worth less than \$2000 will continue to list until sold

**SCHEDULE A-2**  
**Investments, Income, and Assets**  
**of Business Entities/Trusts**  
(Ownership Interest is 10% or Greater)

<b>CALIFORNIA FORM 700</b> FAIR POLITICAL PRACTICES COMMISSION
Name <div style="text-align: right;">Robert D Dutton</div>

**1. BUSINESS ENTITY OR TRUST**

**Dutton & Associates, Inc**

Name  
10681 Foothill Blvd. Suite 340, Rancho Cucamonga, CA

Address (Business Address Acceptable)

Check one  
☐ Trust, go to 2    ☒ Business Entity, complete the box, then go to 2

**GENERAL DESCRIPTION OF BUSINESS ACTIVITY**  
**Real Estate Brokerage**

FAIR MARKET VALUE                      IF APPLICABLE, LIST DATE:

<input checked="" type="checkbox"/> \$2,000 - \$10,000	/ / 10	/ / 10
<input type="checkbox"/> \$10,001 - \$100,000	ACQUIRED	DISPOSED
<input type="checkbox"/> \$100,001 - \$1,000,000		
<input type="checkbox"/> Over \$1,000,000		

NATURE OF INVESTMENT  
☐ Sole Proprietorship    ☐ Partnership    ☒ Corporation    ☐ Other

YOUR BUSINESS POSITION    **President / CEO**

**2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)**

<input type="checkbox"/> \$0 - \$499	<input checked="" type="checkbox"/> \$10,001 - \$100,000
<input type="checkbox"/> \$500 - \$1,000	<input type="checkbox"/> OVER \$100,000
<input type="checkbox"/> \$1,001 - \$10,000	

**3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)**

none

**4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST**

Check one box:  
☐ INVESTMENT    ☐ REAL PROPERTY

none

Name of Business Entity or  
Street Address or Assessor's Parcel Number of Real Property

Description of Business Activity or  
City or Other Precise Location of Real Property

FAIR MARKET VALUE                      IF APPLICABLE, LIST DATE:

<input type="checkbox"/> \$2,000 - \$10,000	/ / 10	/ / 10
<input type="checkbox"/> \$10,001 - \$100,000	ACQUIRED	DISPOSED
<input type="checkbox"/> \$100,001 - \$1,000,000		
<input type="checkbox"/> Over \$1,000,000		

NATURE OF INTEREST  
☐ Property Ownership/Deed of Trust    ☐ Stock    ☐ Partnership

☐ Leasehold    ☐ Other

Yrs. remaining

☐ Check box if additional schedules reporting investments or real property are attached

Comments:

**1. BUSINESS ENTITY OR TRUST**

**Dutton Family Trust**

Name  
4959 Palomino Pl. Rancho Cucamonga, CA

Address (Business Address Acceptable)

Check one  
☒ Trust, go to 2    ☐ Business Entity, complete the box, then go to 2

**GENERAL DESCRIPTION OF BUSINESS ACTIVITY**

FAIR MARKET VALUE                      IF APPLICABLE, LIST DATE:

<input type="checkbox"/> \$2,000 - \$10,000	/ / 10	/ / 10
<input type="checkbox"/> \$10,001 - \$100,000	ACQUIRED	DISPOSED
<input type="checkbox"/> \$100,001 - \$1,000,000		
<input type="checkbox"/> Over \$1,000,000		

NATURE OF INVESTMENT  
☐ Sole Proprietorship    ☐ Partnership    ☐ Other

YOUR BUSINESS POSITION

**2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)**

<input type="checkbox"/> \$0 - \$499	<input type="checkbox"/> \$10,001 - \$100,000
<input type="checkbox"/> \$500 - \$1,000	<input type="checkbox"/> OVER \$100,000
<input type="checkbox"/> \$1,001 - \$10,000	

**3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)**

No income to report. All assets have been reported in sections A1 & A2

**4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST**

Check one box:  
☐ INVESTMENT    ☒ REAL PROPERTY

9617 Carrari Ct, Rancho Cucamonga, CA

Name of Business Entity or  
Street Address or Assessor's Parcel Number of Real Property

former residence to be sold

Description of Business Activity or  
City or Other Precise Location of Real Property

FAIR MARKET VALUE                      IF APPLICABLE, LIST DATE:

<input type="checkbox"/> \$2,000 - \$10,000	/ / 10	/ / 10
<input type="checkbox"/> \$10,001 - \$100,000	ACQUIRED	DISPOSED
<input checked="" type="checkbox"/> \$100,001 - \$1,000,000		
<input type="checkbox"/> Over \$1,000,000		

NATURE OF INTEREST  
☒ Property Ownership/Deed of Trust    ☐ Stock    ☐ Partnership

☐ Leasehold    ☐ Other

Yrs. remaining

☐ Check box if additional schedules reporting investments or real property are attached

**SCHEDULE A-2**  
**Investments, Income, and Assets**  
**of Business Entities/Trusts**  
(Ownership Interest is 10% or Greater)

<b>CALIFORNIA FORM 700</b> FAIR POLITICAL PRACTICES COMMISSION
Name <b>Robert D Dutton</b>

**1. BUSINESS ENTITY OR TRUST**

**Dutton & Associates**

Name

10681 Foothill Blvd. suite 340, Rancho Cucamonga, CA

Address (Business Address Acceptable)

Check one

☐ Trust, go to 2    ☒ Business Entity, complete the box, then go to 2

**GENERAL DESCRIPTION OF BUSINESS ACTIVITY**  
**real estate investments**

**FAIR MARKET VALUE**

☒ \$2,000 - \$10,000

☐ \$10,001 - \$100,000

☐ \$100,001 - \$1,000,000

☐ Over \$1,000,000

**IF APPLICABLE, LIST DATE:**

\_\_\_\_/\_\_\_\_/10

ACQUIRED

\_\_\_\_/\_\_\_\_/10

DISPOSED

**NATURE OF INVESTMENT**

☐ Sole Proprietorship

☒ Partnership

☐ Other

**YOUR BUSINESS POSITION**

Partner

**2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)**

☐ \$0 - \$499

☒ \$10,001 - \$100,000

☐ \$500 - \$1,000

☐ OVER \$100,000

☐ \$1,001 - \$10,000

**3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)**

none

**4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST**

Check one box:

☐ INVESTMENT

☐ REAL PROPERTY

none

Name of Business Entity or

Street Address or Assessor's Parcel Number of Real Property

Description of Business Activity or

City or Other Precise Location of Real Property

**FAIR MARKET VALUE**

☐ \$2,000 - \$10,000

☐ \$10,001 - \$100,000

☐ \$100,001 - \$1,000,000

☐ Over \$1,000,000

**IF APPLICABLE, LIST DATE:**

\_\_\_\_/\_\_\_\_/10

ACQUIRED

\_\_\_\_/\_\_\_\_/10

DISPOSED

**NATURE OF INTEREST**

☐ Property Ownership/Deed of Trust

☐ Stock

☐ Partnership

☐ Leasehold

Yrs. remaining

☐ Other

☐ Check box if additional schedules reporting investments or real property are attached

**1. BUSINESS ENTITY OR TRUST**

**West End Investments**

Name

10681 Foothill Blvd. Suite340, Rancho Cucamonga, CA

Address (Business Address Acceptable)

Check one

☐ Trust, go to 2    ☒ Business Entity, complete the box, then go to 2

**GENERAL DESCRIPTION OF BUSINESS ACTIVITY**

**FAIR MARKET VALUE**

☐ \$2,000 - \$10,000

☒ \$10,001 - \$100,000

☐ \$100,001 - \$1,000,000

☐ Over \$1,000,000

**IF APPLICABLE, LIST DATE:**

\_\_\_\_/\_\_\_\_/10

ACQUIRED

\_\_\_\_/\_\_\_\_/10

DISPOSED

**NATURE OF INVESTMENT**

☐ Sole Proprietorship

☒ Partnership

☐ Other

**YOUR BUSINESS POSITION**

Partner

**2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)**

☐ \$0 - \$499

☒ \$10,001 - \$100,000

☐ \$500 - \$1,000

☐ OVER \$100,000

☐ \$1,001 - \$10,000

**3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)**

Ninety Nine Limited

**4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST**

Check one box:

☐ INVESTMENT

☐ REAL PROPERTY

none

Name of Business Entity or

Street Address or Assessor's Parcel Number of Real Property

Description of Business Activity or

City or Other Precise Location of Real Property

**FAIR MARKET VALUE**

☐ \$2,000 - \$10,000

☐ \$10,001 - \$100,000

☐ \$100,001 - \$1,000,000

☐ Over \$1,000,000

**IF APPLICABLE, LIST DATE:**

\_\_\_\_/\_\_\_\_/10

ACQUIRED

\_\_\_\_/\_\_\_\_/10

DISPOSED

**NATURE OF INTEREST**

☐ Property Ownership/Deed of Trust

☐ Stock

☐ Partnership

☐ Leasehold

Yrs. remaining

☐ Other

☐ Check box if additional schedules reporting investments or real property are attached

Comments:

**SCHEDULE C**  
**Income, Loans, & Business**  
**Positions**  
(Other than Gifts and Travel Payments)

<b>CALIFORNIA FORM 700</b> FAIR POLITICAL PRACTICES COMMISSION
Name <b>Robert D Dutton</b>

▶ 1. INCOME RECEIVED	▶ 1. INCOME RECEIVED
NAME OF SOURCE OF INCOME <b>Wolter Kluwer Health, Inc</b>	NAME OF SOURCE OF INCOME <b>United Investors LLC</b>
ADDRESS (Business Address Acceptable) <b>530 Walnut St., Philadelphia, PA</b>	ADDRESS (Business Address Acceptable) <b>Ontario, Ca</b>
BUSINESS ACTIVITY, IF ANY, OF SOURCE <b>Book Publisher</b>	BUSINESS ACTIVITY, IF ANY, OF SOURCE <b>Investments</b>
YOUR BUSINESS POSITION <b>spouse is coauthor</b>	YOUR BUSINESS POSITION <b>Partner</b>
GROSS INCOME RECEIVED <input type="checkbox"/> \$500 - \$1,000 <input checked="" type="checkbox"/> \$1,001 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> OVER \$100,000	GROSS INCOME RECEIVED <input type="checkbox"/> \$500 - \$1,000 <input type="checkbox"/> \$1,001 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input checked="" type="checkbox"/> OVER \$100,000
CONSIDERATION FOR WHICH INCOME WAS RECEIVED <input type="checkbox"/> Salary <input type="checkbox"/> Spouse's or registered domestic partner's income <input type="checkbox"/> Loan repayment <input type="checkbox"/> Partnership <input type="checkbox"/> Sale of _____ (Property, car, boat, etc.) <input type="checkbox"/> Commission or <input type="checkbox"/> Rental Income, list each source of \$10,000 or more  <input checked="" type="checkbox"/> Other <b>Royalty Income</b> (Describe)	CONSIDERATION FOR WHICH INCOME WAS RECEIVED <input type="checkbox"/> Salary <input type="checkbox"/> Spouse's or registered domestic partner's income <input type="checkbox"/> Loan repayment <input type="checkbox"/> Partnership <input checked="" type="checkbox"/> Sale of <b>Interest in Partnership</b> (Property, car, boat, etc.) <input type="checkbox"/> Commission or <input type="checkbox"/> Rental Income, list each source of \$10,000 or more  <input type="checkbox"/> Other _____ (Describe)

▶ 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD		
<p>* You are not required to report loans from commercial lending institutions, or any indebtedness created as part of a retail installment or credit card transaction, made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:</p>		
NAME OF LENDER*	INTEREST RATE	TERM (Months/Years)
ADDRESS (Business Address Acceptable)	_____ % <input type="checkbox"/> None	_____
BUSINESS ACTIVITY, IF ANY, OF LENDER	SECURITY FOR LOAN	
HIGHEST BALANCE DURING REPORTING PERIOD	<input type="checkbox"/> None <input type="checkbox"/> Personal residence	
<input type="checkbox"/> \$500 - \$1,000	<input type="checkbox"/> Real Property _____	Street address
<input type="checkbox"/> \$1,001 - \$10,000		City
<input type="checkbox"/> \$10,001 - \$100,000	<input type="checkbox"/> Guarantor _____	
<input type="checkbox"/> OVER \$100,000	<input type="checkbox"/> Other _____	(Describe)
Comments: _____		

# SCHEDULE D

## Income – Gifts

CALIFORNIA FORM **700**

FAIR POLITICAL PRACTICES COMMISSION

Name

Senator Bob Dutton

► NAME OF SOURCE

Viejas Band of Kumeyaay Indians

ADDRESS (Business Address Acceptable)

1 Viejas Grade Road, Alpine, CA 91901

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Promotes tribal issues

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
-----------------	-------	------------------------

09 / 14 / 10	\$ 71.76	Food & Drink
--------------	----------	--------------

____ / ____ / ____	\$ _____	_____
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____ / ____ / ____	\$ _____	_____
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► NAME OF SOURCE

San Manuel Band of Mission Indians

ADDRESS (Business Address Acceptable)

26569 Community Center Dr., Highland, CA 92346

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Promotes tribal issues

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
-----------------	-------	------------------------

12 / 06 / 10	\$ 26.66	Food & Drink
--------------	----------	--------------

____ / ____ / ____	\$ _____	_____
--------------------	----------	-------

____ / ____ / ____	\$ _____	_____
--------------------	----------	-------

► NAME OF SOURCE

AimPoint

ADDRESS (Business Address Acceptable)

1020 12th St., Su. 401, Sac., CA 95814

BUSINESS ACTIVITY, IF ANY, OF SOURCE

A political organization

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
-----------------	-------	------------------------

12 / 07 / 10	\$ 35.00	Food & Drink
--------------	----------	--------------

____ / ____ / ____	\$ _____	_____
--------------------	----------	-------

____ / ____ / ____	\$ _____	_____
--------------------	----------	-------

► NAME OF SOURCE

League of California Cities

ADDRESS (Business Address Acceptable)

1400 K St., Su. 400, Sac., CA 95814

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Promotes common interests of CA cities

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
-----------------	-------	------------------------

11 / 04 / 10	\$ 45.58	Food & Drink
--------------	----------	--------------

____ / ____ / ____	\$ _____	_____
--------------------	----------	-------

____ / ____ / ____	\$ _____	_____
--------------------	----------	-------

► NAME OF SOURCE

CA Medical Association

ADDRESS (Business Address Acceptable)

1201 J St., Su. 200, Sac. CA 95814

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Represents physicians & their patients

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
-----------------	-------	------------------------

12 / 06 / 10	\$ 23.88	Food & Drink
--------------	----------	--------------

____ / ____ / ____	\$ _____	_____
--------------------	----------	-------

____ / ____ / ____	\$ _____	_____
--------------------	----------	-------

► NAME OF SOURCE

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
-----------------	-------	------------------------

____ / ____ / ____	\$ _____	_____
--------------------	----------	-------

____ / ____ / ____	\$ _____	_____
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____ / ____ / ____	\$ _____	_____
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Comments:

# SCHEDULE D Income – Gifts

<b>CALIFORNIA FORM 700</b> FAIR POLITICAL PRACTICES COMMISSION Name Senator Bob Dutton
---

▶ NAME OF SOURCE CA State Sheriffs' Association ADDRESS (Business Address Acceptable) 1231 I Street, Su. 200, Sac., CA 95814 BUSINESS ACTIVITY, IF ANY, OF SOURCE Promotes law enforcement issues <table border="1"> <thead> <tr> <th>DATE (mm/dd/yy)</th> <th>VALUE</th> <th>DESCRIPTION OF GIFT(S)</th> </tr> </thead> <tbody> <tr> <td>05 / 18 / 10</td> <td>\$ 58.49</td> <td>Food &amp; Drink</td> </tr> <tr> <td>____ / ____ / ____</td> <td>\$ _____</td> <td>_____</td> </tr> <tr> <td>____ / ____ / ____</td> <td>\$ _____</td> <td>_____</td> </tr> </tbody> </table>	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	05 / 18 / 10	\$ 58.49	Food & Drink	____ / ____ / ____	\$ _____	_____	____ / ____ / ____	\$ _____	_____	▶ NAME OF SOURCE CA Hospital Association ADDRESS (Business Address Acceptable) 1215 K St., Su. 800, Sac., CA 95814 BUSINESS ACTIVITY, IF ANY, OF SOURCE Represents CA public hospital systems <table border="1"> <thead> <tr> <th>DATE (mm/dd/yy)</th> <th>VALUE</th> <th>DESCRIPTION OF GIFT(S)</th> </tr> </thead> <tbody> <tr> <td>06 / 01 / 10</td> <td>\$ 200.00</td> <td>Food &amp; Drink</td> </tr> <tr> <td>____ / ____ / ____</td> <td>\$ _____</td> <td>_____</td> </tr> <tr> <td>____ / ____ / ____</td> <td>\$ _____</td> <td>_____</td> </tr> </tbody> </table>	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	06 / 01 / 10	\$ 200.00	Food & Drink	____ / ____ / ____	\$ _____	_____	____ / ____ / ____	\$ _____	_____
DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)																							
05 / 18 / 10	\$ 58.49	Food & Drink																							
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06 / 01 / 10	\$ 200.00	Food & Drink																							
____ / ____ / ____	\$ _____	_____																							
____ / ____ / ____	\$ _____	_____																							
▶ NAME OF SOURCE CA Association of Realtors ADDRESS (Business Address Acceptable) 525 South Virgil Ave., L.A., CA 90020 BUSINESS ACTIVITY, IF ANY, OF SOURCE Promotes interests of CA real estate agents <table border="1"> <thead> <tr> <th>DATE (mm/dd/yy)</th> <th>VALUE</th> <th>DESCRIPTION OF GIFT(S)</th> </tr> </thead> <tbody> <tr> <td>06 / 09 / 10</td> <td>\$ 49.00</td> <td>Food &amp; Drink</td> </tr> <tr> <td>____ / ____ / ____</td> <td>\$ _____</td> <td>_____</td> </tr> <tr> <td>____ / ____ / ____</td> <td>\$ _____</td> <td>_____</td> </tr> </tbody> </table>	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	06 / 09 / 10	\$ 49.00	Food & Drink	____ / ____ / ____	\$ _____	_____	____ / ____ / ____	\$ _____	_____	▶ NAME OF SOURCE Institute of Governmental Advocates ADDRESS (Business Address Acceptable) 915 L St., Sac., CA 95814 BUSINESS ACTIVITY, IF ANY, OF SOURCE Represents lobbyists and lobbying firms <table border="1"> <thead> <tr> <th>DATE (mm/dd/yy)</th> <th>VALUE</th> <th>DESCRIPTION OF GIFT(S)</th> </tr> </thead> <tbody> <tr> <td>07 / 08 / 10</td> <td>\$ 237.30</td> <td>Lodging</td> </tr> <tr> <td>07 / 09 / 10</td> <td>\$ 127.05</td> <td>Food &amp; Drink</td> </tr> <tr> <td>____ / ____ / ____</td> <td>\$ _____</td> <td>_____</td> </tr> </tbody> </table>	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	07 / 08 / 10	\$ 237.30	Lodging	07 / 09 / 10	\$ 127.05	Food & Drink	____ / ____ / ____	\$ _____	_____
DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)																							
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07 / 08 / 10	\$ 237.30	Lodging																							
07 / 09 / 10	\$ 127.05	Food & Drink																							
____ / ____ / ____	\$ _____	_____																							
▶ NAME OF SOURCE Intuit Inc. ADDRESS (Business Address Acceptable) 2600 Capitol Avenue, Su. 300, Sac., CA 95816 BUSINESS ACTIVITY, IF ANY, OF SOURCE Builds Websites for small businesses <table border="1"> <thead> <tr> <th>DATE (mm/dd/yy)</th> <th>VALUE</th> <th>DESCRIPTION OF GIFT(S)</th> </tr> </thead> <tbody> <tr> <td>08 / 02 / 10</td> <td>\$ 51.37</td> <td>Food &amp; Drink</td> </tr> <tr> <td>____ / ____ / ____</td> <td>\$ _____</td> <td>_____</td> </tr> <tr> <td>____ / ____ / ____</td> <td>\$ _____</td> <td>_____</td> </tr> </tbody> </table>	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	08 / 02 / 10	\$ 51.37	Food & Drink	____ / ____ / ____	\$ _____	_____	____ / ____ / ____	\$ _____	_____	▶ NAME OF SOURCE Senator Sam Blakeslee ADDRESS (Business Address Acceptable) State Capitol, Room 4070, Sac., CA 95814 BUSINESS ACTIVITY, IF ANY, OF SOURCE Senator <table border="1"> <thead> <tr> <th>DATE (mm/dd/yy)</th> <th>VALUE</th> <th>DESCRIPTION OF GIFT(S)</th> </tr> </thead> <tbody> <tr> <td>08 / 31 / 10</td> <td>\$ 29.79</td> <td>Bottle of wine</td> </tr> <tr> <td>____ / ____ / ____</td> <td>\$ _____</td> <td>_____</td> </tr> <tr> <td>____ / ____ / ____</td> <td>\$ _____</td> <td>_____</td> </tr> </tbody> </table>	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	08 / 31 / 10	\$ 29.79	Bottle of wine	____ / ____ / ____	\$ _____	_____	____ / ____ / ____	\$ _____	_____
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____ / ____ / ____	\$ _____	_____																							
____ / ____ / ____	\$ _____	_____																							

Comments: \_\_\_\_\_

# SCHEDULE D

## Income – Gifts

<b>CALIFORNIA FORM 700</b>
FAIR POLITICAL PRACTICES COMMISSION
Name  Senator Bob Dutton

► NAME OF SOURCE  
National Federation of Independent Business

ADDRESS (Business Address Acceptable)  
921 11th Street, Su. 400, Sac., CA 95814

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Promotes opportunities for independent businesses

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>04 / 28 / 10</u>	\$ <u>66.78</u>	<u>Food &amp; Drink</u>
<u>  /  /  </u>	\$ <u>      </u>	<u>      </u>
<u>  /  /  </u>	\$ <u>      </u>	<u>      </u>

► NAME OF SOURCE  
CalChamber

ADDRESS (Business Address Acceptable)  
1215 K Street, Su. 1400, Sac., CA 95814

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Helps businesses comply w/federal & state laws

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>05 / 17 / 10</u>	\$ <u>32.66</u>	<u>Food &amp; Drink</u>
<u>05 / 17 / 10</u>	\$ <u>64.07</u>	<u>Food &amp; Drink</u>
<u>11 / 11 / 10</u>	\$ <u>116.05</u>	<u>Food &amp; Drink</u>

► NAME OF SOURCE  
California Refuse Recycling Council, S. District

ADDRESS (Business Address Acceptable)  
1851 E. 1st St., Su. 1220, Santa Ana, CA 92705

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Represents solid waste & recycling companies

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>05 / 18 / 10</u>	\$ <u>41.33</u>	<u>Food &amp; Drink</u>
<u>  /  /  </u>	\$ <u>      </u>	<u>      </u>
<u>  /  /  </u>	\$ <u>      </u>	<u>      </u>

► NAME OF SOURCE  
CA Building Industry Association

ADDRESS (Business Address Acceptable)  
1215 K Street, Su. 1200, Sacramento, CA 95814

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Represent companies that plan & build communities

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>05 / 05 / 10</u>	\$ <u>79.55</u>	<u>Food &amp; Drink</u>
<u>  /  /  </u>	\$ <u>      </u>	<u>      </u>
<u>  /  /  </u>	\$ <u>      </u>	<u>      </u>

► NAME OF SOURCE  
California Refuse Recycling Council, N. District

ADDRESS (Business Address Acceptable)  
1121 L St., Su. 505, Sac., CA 95814

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Represents solid waste & recycling companies

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>05 / 18 / 10</u>	\$ <u>41.33</u>	<u>Food &amp; Drink</u>
<u>  /  /  </u>	\$ <u>      </u>	<u>      </u>
<u>  /  /  </u>	\$ <u>      </u>	<u>      </u>

► NAME OF SOURCE  
The Walt Disney Company

ADDRESS (Business Address Acceptable)  
500 S. Buena Vista St., Burbank, CA 91521

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Promotes entertainment

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>05 / 18 / 10</u>	\$ <u>14.25</u>	<u>Screening of Iron Man</u>
<u>  /  /  </u>	\$ <u>      </u>	<u>      </u>
<u>  /  /  </u>	\$ <u>      </u>	<u>      </u>

Comments: \_\_\_\_\_

# SCHEDULE D Income – Gifts

<b>CALIFORNIA FORM 700</b>
FAIR POLITICAL PRACTICES COMMISSION
Name  Senator Bob Dutton

<p>► NAME OF SOURCE <u>CA Ambulance Association</u></p> <p>ADDRESS (Business Address Acceptable) <u>2520 Venture Oaks Way, Suite 150, Sac., CA 95833</u></p> <p>BUSINESS ACTIVITY, IF ANY, OF SOURCE <u>Represents interests of ambulance services</u></p> <table border="1"> <thead> <tr> <th>DATE (mm/dd/yy)</th> <th>VALUE</th> <th>DESCRIPTION OF GIFT(S)</th> </tr> </thead> <tbody> <tr> <td><u>04 / 20 / 10</u></td> <td><u>\$ 7.50</u></td> <td><u>Drink</u></td> </tr> <tr> <td><u>  /  /  </u></td> <td><u>\$</u></td> <td><u> </u></td> </tr> <tr> <td><u>  /  /  </u></td> <td><u>\$</u></td> <td><u> </u></td> </tr> </tbody> </table>	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	<u>04 / 20 / 10</u>	<u>\$ 7.50</u>	<u>Drink</u>	<u>  /  /  </u>	<u>\$</u>	<u> </u>	<u>  /  /  </u>	<u>\$</u>	<u> </u>	<p>► NAME OF SOURCE <u>CA Rice Commission</u></p> <p>ADDRESS (Business Address Acceptable) <u>8801 Folsom Blvd, Su. 172, Sacramento, CA 95826</u></p> <p>BUSINESS ACTIVITY, IF ANY, OF SOURCE <u>Promotes production of rice</u></p> <table border="1"> <thead> <tr> <th>DATE (mm/dd/yy)</th> <th>VALUE</th> <th>DESCRIPTION OF GIFT(S)</th> </tr> </thead> <tbody> <tr> <td><u>02 / 10 / 10</u></td> <td><u>\$ 28.71</u></td> <td><u>Box of rice products</u></td> </tr> <tr> <td><u>  /  /  </u></td> <td><u>\$</u></td> <td><u> </u></td> </tr> <tr> <td><u>  /  /  </u></td> <td><u>\$</u></td> <td><u> </u></td> </tr> </tbody> </table>	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	<u>02 / 10 / 10</u>	<u>\$ 28.71</u>	<u>Box of rice products</u>	<u>  /  /  </u>	<u>\$</u>	<u> </u>	<u>  /  /  </u>	<u>\$</u>	<u> </u>
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<u>  /  /  </u>	<u>\$</u>	<u> </u>																							
<p>► NAME OF SOURCE <u>Western States Petroleum Association</u></p> <p>ADDRESS (Business Address Acceptable) <u>1415 L St., Su. 1200, Sacramento, CA 95814</u></p> <p>BUSINESS ACTIVITY, IF ANY, OF SOURCE <u>Promotes interests in petroleum</u></p> <table border="1"> <thead> <tr> <th>DATE (mm/dd/yy)</th> <th>VALUE</th> <th>DESCRIPTION OF GIFT(S)</th> </tr> </thead> <tbody> <tr> <td><u>02 / 23 / 10</u></td> <td><u>\$ 62.03</u></td> <td><u>Food &amp; Drink</u></td> </tr> <tr> <td><u>03 / 16 / 10</u></td> <td><u>\$ 38.59</u></td> <td><u>Food &amp; Drink</u></td> </tr> <tr> <td><u>  /  /  </u></td> <td><u>\$</u></td> <td><u> </u></td> </tr> </tbody> </table>	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	<u>02 / 23 / 10</u>	<u>\$ 62.03</u>	<u>Food &amp; Drink</u>	<u>03 / 16 / 10</u>	<u>\$ 38.59</u>	<u>Food &amp; Drink</u>	<u>  /  /  </u>	<u>\$</u>	<u> </u>	<p>► NAME OF SOURCE <u>Barona Band of Mission Indians</u></p> <p>ADDRESS (Business Address Acceptable) <u>1095 Barona Rd., Lakeside, CA 92040</u></p> <p>BUSINESS ACTIVITY, IF ANY, OF SOURCE <u>Promotes tribal issues</u></p> <table border="1"> <thead> <tr> <th>DATE (mm/dd/yy)</th> <th>VALUE</th> <th>DESCRIPTION OF GIFT(S)</th> </tr> </thead> <tbody> <tr> <td><u>03 / 02 / 10</u></td> <td><u>\$ 34.64</u></td> <td><u>Food &amp; Drink</u></td> </tr> <tr> <td><u>09 / 14 / 10</u></td> <td><u>\$ 56.25</u></td> <td><u>Food &amp; Drink</u></td> </tr> <tr> <td><u>  /  /  </u></td> <td><u>\$</u></td> <td><u> </u></td> </tr> </tbody> </table>	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	<u>03 / 02 / 10</u>	<u>\$ 34.64</u>	<u>Food &amp; Drink</u>	<u>09 / 14 / 10</u>	<u>\$ 56.25</u>	<u>Food &amp; Drink</u>	<u>  /  /  </u>	<u>\$</u>	<u> </u>
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<u>09 / 14 / 10</u>	<u>\$ 56.25</u>	<u>Food &amp; Drink</u>																							
<u>  /  /  </u>	<u>\$</u>	<u> </u>																							
<p>► NAME OF SOURCE <u>Napa Valley Vintners</u></p> <p>ADDRESS (Business Address Acceptable) <u>P. O. Box 141, St. Helena, CA 94574</u></p> <p>BUSINESS ACTIVITY, IF ANY, OF SOURCE <u>Represents Napa Valley wineries</u></p> <table border="1"> <thead> <tr> <th>DATE (mm/dd/yy)</th> <th>VALUE</th> <th>DESCRIPTION OF GIFT(S)</th> </tr> </thead> <tbody> <tr> <td><u>03 / 03 / 10</u></td> <td><u>\$ 12.75</u></td> <td><u>Food &amp; Drink</u></td> </tr> <tr> <td><u>  /  /  </u></td> <td><u>\$</u></td> <td><u> </u></td> </tr> <tr> <td><u>  /  /  </u></td> <td><u>\$</u></td> <td><u> </u></td> </tr> </tbody> </table>	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	<u>03 / 03 / 10</u>	<u>\$ 12.75</u>	<u>Food &amp; Drink</u>	<u>  /  /  </u>	<u>\$</u>	<u> </u>	<u>  /  /  </u>	<u>\$</u>	<u> </u>	<p>► NAME OF SOURCE <u>Personal Insurance Federation of CA</u></p> <p>ADDRESS (Business Address Acceptable) <u>1201 K Street, Su. 1220, Sacramento, CA 95814</u></p> <p>BUSINESS ACTIVITY, IF ANY, OF SOURCE <u>Represents member companies on insurance matter</u></p> <table border="1"> <thead> <tr> <th>DATE (mm/dd/yy)</th> <th>VALUE</th> <th>DESCRIPTION OF GIFT(S)</th> </tr> </thead> <tbody> <tr> <td><u>03 / 03 / 10</u></td> <td><u>\$ 47.25</u></td> <td><u>Food &amp; Drink</u></td> </tr> <tr> <td><u>  /  /  </u></td> <td><u>\$</u></td> <td><u> </u></td> </tr> <tr> <td><u>  /  /  </u></td> <td><u>\$</u></td> <td><u> </u></td> </tr> </tbody> </table>	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	<u>03 / 03 / 10</u>	<u>\$ 47.25</u>	<u>Food &amp; Drink</u>	<u>  /  /  </u>	<u>\$</u>	<u> </u>	<u>  /  /  </u>	<u>\$</u>	<u> </u>
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<u>  /  /  </u>	<u>\$</u>	<u> </u>																							

Comments: \_\_\_\_\_

# SCHEDULE D Income – Gifts

**CALIFORNIA FORM 700**

FAIR POLITICAL PRACTICES COMMISSION

Name

Senator Bob Dutton

► NAME OF SOURCE

CA State Protocol Foundation

ADDRESS (Business Address Acceptable)

1215 K St., Su. 1400, Sacramento, CA 95814

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Non-profit organization

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
01 / 06 / 10	\$ 35.47	Food & Drink
/  /	\$	
/  /	\$	

► NAME OF SOURCE

CA Tribal Business Alliance

ADDRESS (Business Address Acceptable)

1530 J Street, Suite 250, Sacramento, CA 95814

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Promotes business opportunities for CA tribes

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
01 / 12 / 10	\$ 92.68	Food & Drink
/  /	\$	
/  /	\$	

► NAME OF SOURCE

CA Correctional Peace Officers Association

ADDRESS (Business Address Acceptable)

755 Riverport Drive, W. Sacramento, CA 95605

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Promotes interests of CA correctional officers

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
01 / 26 / 10	\$ 76.95	Food & Drink
/  /	\$	
/  /	\$	

► NAME OF SOURCE

Governor Arnold Schwarzenegger

ADDRESS (Business Address Acceptable)

State Capitol, Sacramento, CA 95814

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Government

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
01 / 06 / 10	\$ 21.53	Food & Drink
/  /	\$	
/  /	\$	

► NAME OF SOURCE

Pacific Gas & Electric Company

ADDRESS (Business Address Acceptable)

1415 L Street, Suite 280, Sacramento, CA 95814

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Promotes the gas & electric business

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
01 / 19 / 10	\$ 159.37	Food & Drink
07 / 20 / 10	\$ 209.86	Food & Drink
/  /	\$	
/  /	\$	

► NAME OF SOURCE

CA Taxpayers' Association

ADDRESS (Business Address Acceptable)

1215 K Street, #1250, Sacramento, CA 95814

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Promotes government efficiency

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
01 / 27 / 10	\$ 11.30	Food & Drink
/  /	\$	
/  /	\$	

Comments:

# SCHEDULE D Income – Gifts

<b>CALIFORNIA FORM 700</b> FAIR POLITICAL PRACTICES COMMISSION Name Senator Bob Dutton
---

▶ NAME OF SOURCE  
 CA Mortgage Bankers Association  
 ADDRESS (Business Address Acceptable)  
 980 Ninth Street, Su. 2120, Sac., CA 95814  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
 Promotes member banks

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
03 / 08 / 10	\$ 33.51	Food & Drink
/  /	\$	
/  /	\$	

▶ NAME OF SOURCE  
 CA State Council of Laborers  
 ADDRESS (Business Address Acceptable)  
 1121 L St., Su. 502, Sac. CA 95814  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
 Addresses issues of laborers

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
03 / 16 / 10	\$ 46.46	Food & Drink
/  /	\$	
/  /	\$	

▶ NAME OF SOURCE  
 Inland Empire Utilities Agency  
 ADDRESS (Business Address Acceptable)  
 6075 Kimball Ave., Bldg. A, Chino, CA 91710  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
 Provides utility related services to communities

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
03 / 16 / 10	\$ .54	Food & Drink
/  /	\$	
/  /	\$	

▶ NAME OF SOURCE  
 Southern California Contractors Association, Inc.  
 ADDRESS (Business Address Acceptable)  
 6055 E. Washington Blvd., Su. 200, L.A., CA 90040  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
 Represents interest of union construction contractors

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
03 / 16 / 10	\$ 35.00	Food & Drink
/  /	\$	
/  /	\$	

▶ NAME OF SOURCE  
 California State Floral Association  
 ADDRESS (Business Address Acceptable)  
 1521 I St., Sacramento, CA 95814  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
 Represents Floral Industry

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
03 / 23 / 10	\$ 16.95	Bouquet of flowers
/  /	\$	
/  /	\$	

▶ NAME OF SOURCE  
 Personal Care Products Council  
 ADDRESS (Business Address Acceptable)  
 925 L Street, Suite 850, Sac., CA 95814  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
 Rep. consumer & personal care products industries

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
04 / 07 / 10	\$ 10.17	Food & Drink
/  /	\$	
/  /	\$	

Comments: \_\_\_\_\_

# SCHEDULE D Income – Gifts

**CALIFORNIA FORM 700**

FAIR POLITICAL PRACTICES COMMISSION

Name

Robert D. Dutton

► NAME OF SOURCE

3M Company

ADDRESS (Business Address Acceptable)

900 17th St., NW, Suite 300, Washington, DC 20016

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Manufactures & sells household products

DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)

04 / 14 / 10 \$ 6.27 Various

/ / \$

/ / \$

► NAME OF SOURCE

Ecolab Inc.

ADDRESS (Business Address Acceptable)

900 17th St., NW, Suite 300, Washington, DC 20016

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Manufactures & sells household products

DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)

04 / 14 / 10 \$ .60 Various

/ / \$

/ / \$

► NAME OF SOURCE

Henkel Consumer Goods, Inc.

ADDRESS (Business Address Acceptable)

900 17th St., NW, Suite 300, Washington, DC 20016

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Manufactures & sells household products

DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)

04 / 14 / 10 \$ 4.75 Various

/ / \$

/ / \$

► NAME OF SOURCE

The Clorox Company

ADDRESS (Business Address Acceptable)

900 17th St., NW, Suite 300, Washington, DC 20016

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Manufactures & sells household products

DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)

04 / 14 / 10 \$ 7.35 Various

/ / \$

/ / \$

► NAME OF SOURCE

Farnam Companies, Inc.

ADDRESS (Business Address Acceptable)

900 17th St., NW, Suite 300, Washington, DC 20016

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Manufactures & sells household products

DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)

04 / 14 / 10 \$ 6.68 Various

/ / \$

/ / \$

► NAME OF SOURCE

Honeywell Consumer Products Group

ADDRESS (Business Address Acceptable)

900 17th St., NW, Suite 300, Washington, DC 20016

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Manufactures & sells household products

DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)

04 / 14 / 10 \$ 4.50 Various

/ / \$

/ / \$

Comments:

# SCHEDULE D

## Income – Gifts

<b>CALIFORNIA FORM 700</b> FAIR POLITICAL PRACTICES COMMISSION Name Robert D. Dutton
---

► NAME OF SOURCE  
McLaughlin Gormley King  
 ADDRESS (Business Address Acceptable)  
900 17th St., NW, Suite 300, Washington, DC 20016  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Manufactures & sells household products

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>04 / 14 / 10</u>	\$ <u>1.85</u>	<u>Various</u>
<u>  /  /  </u>	\$ <u>      </u>	<u>      </u>
<u>  /  /  </u>	\$ <u>      </u>	<u>      </u>

► NAME OF SOURCE  
Reckitt Benckiser, Inc.  
 ADDRESS (Business Address Acceptable)  
900 17th St., NW, Suite 300, Washington, DC 20016  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Manufactures & sells household products

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>04 / 14 / 10</u>	\$ <u>4.96</u>	<u>Various</u>
<u>  /  /  </u>	\$ <u>      </u>	<u>      </u>
<u>  /  /  </u>	\$ <u>      </u>	<u>      </u>

► NAME OF SOURCE  
The Scott's Company  
 ADDRESS (Business Address Acceptable)  
900 17th St., NW, Suite 300, Washington, DC 20016  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Manufactures & sells household products

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>04 / 14 / 10</u>	\$ <u>6.41</u>	<u>Various</u>
<u>  /  /  </u>	\$ <u>      </u>	<u>      </u>
<u>  /  /  </u>	\$ <u>      </u>	<u>      </u>

► NAME OF SOURCE  
Procter & Gamble  
 ADDRESS (Business Address Acceptable)  
900 17th St., NW, Suite 300, Washington, DC 20016  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Manufactures & sells household products

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>04 / 14 / 10</u>	\$ <u>9.24</u>	<u>Various</u>
<u>  /  /  </u>	\$ <u>      </u>	<u>      </u>
<u>  /  /  </u>	\$ <u>      </u>	<u>      </u>

► NAME OF SOURCE  
SC Johnson - A Family Company  
 ADDRESS (Business Address Acceptable)  
900 17th St., NW, Suite 300, Washington, DC 20016  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Manufactures & sells household products

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>04 / 14 / 10</u>	\$ <u>5.35</u>	<u>Various</u>
<u>  /  /  </u>	\$ <u>      </u>	<u>      </u>
<u>  /  /  </u>	\$ <u>      </u>	<u>      </u>

► NAME OF SOURCE  
Shell Lubricants Company  
 ADDRESS (Business Address Acceptable)  
900 17th St., NW, Suite 300, Washington, DC 20016  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Manufactures & sells household products

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>04 / 14 / 10</u>	\$ <u>6.98</u>	<u>Various</u>
<u>  /  /  </u>	\$ <u>      </u>	<u>      </u>
<u>  /  /  </u>	\$ <u>      </u>	<u>      </u>

Comments: \_\_\_\_\_

# SCHEDULE D Income – Gifts

CALIFORNIA FORM **700**

FAIR POLITICAL PRACTICES COMMISSION

Name

Robert D. Dutton

► NAME OF SOURCE

Sherwin-Williams Diversified Brands

ADDRESS (Business Address Acceptable)

900 17th St., NW, Suite 300, Washington, DC 20016

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Manufactures & sells household products

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
04 / 14 / 10	\$ 6.62	Various
/  /	\$	
/  /	\$	

► NAME OF SOURCE

Consumer Specialty Products Association

ADDRESS (Business Address Acceptable)

900 17th St., NW, Suite 300, Washington, DC 20016

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Manufactures & sells household products

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
04 / 14 / 10	\$ 10.13	Bag
/  /	\$	
/  /	\$	

► NAME OF SOURCE

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
/  /	\$	
/  /	\$	
/  /	\$	

► NAME OF SOURCE

WD-40 Company

ADDRESS (Business Address Acceptable)

900 17th St., NW, Suite 300, Washington, DC 20016

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Manufactures & sells household products

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
04 / 14 / 10	\$ 3.58	Various
/  /	\$	
/  /	\$	

► NAME OF SOURCE

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
/  /	\$	
/  /	\$	
/  /	\$	

► NAME OF SOURCE

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
/  /	\$	
/  /	\$	
/  /	\$	

Comments: